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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*  
*none here*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*none here*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED  
 \*\* 02/14/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after conditions met <i>Allowance</i> Verified and <i>Believe M. Ochoa</i> Acknowledged Examiner's Signature <i>bms</i> Initials	STATE OR COUNTRY OH	SHEETS DRAWING 9 ✓	TOTAL CLAIMS <i>13</i>	INDEPENDENT CLAIMS 4 —
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ADDRESS  
 c/o Frost Brown Todd LLC  
 2200 PNC Center  
 201 East Fifth Street  
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TITLE  
 System and method for database conversion

FILING FEE  RECEIVED 824	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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